



Non-Profit Recovery Application

This form will not save your progress. Please complete in one sitting. You can preview the full application [HERE](#). Thank you for application.

1. Are you applying for Recovery funding?

Recovery Funding: Provides economic assistance to eligible organizations to help them recover from the financial impacts of the COVID-19 public health emergency.

Resilience Funding: For projects and/or services that need a one-time funding boost to meet specific community service needs as a result of the COVID-19 public health emergency.

Organizations may apply for both Resilience and Recovery funds by completing one application for each funding category. The total funding request from each organization, whether applying for Resilience, Recovery, or both, must equal less than \$50,000.

☐ Yes, I am applying for Recovery funds

☐ No, I would like to apply for Resilience funds

Resilience Funding

<https://forms.office.com/g/fiM5Mvc1yD> (<https://forms.office.com/g/fiM5Mvc1yD>).

Recovery Applicant Information

2. Name of Agency or Organization:

3. Primary Contact:

Please include name, title, email, and phone number.

4. Chief Administrator:

Please include name, title, email, and phone number.

5. Year Founded:

6. Mission Statement:

7. Organization Address:

Please include mailing address, if different.

8. Is your organization registered as a 501(c)(3) charitable organization or a 501(c)(19) veteran's service organization?

☐ Yes

☐ No

9. Provide your organization's Employer Identification Number (EIN):

10. Provide your organization's DUNS number (if applicable):

11. Is your organization currently or has it ever been an Ulster County vendor?

☐ Yes

☐ No

12. Does your organization have a brick-and-mortar location within Ulster County?

What percentage of your work targets Ulster County? What other geographical areas does your organization serve?

13. Does your organization work in communities located in an Ulster County Qualified Census Tract(s) (QCT)? If so, please select all that apply.

Map of QCTs in Ulster County: <https://ulstercounty.maps.arcgis.com/apps/webappviewer/index.html?id=b6fa6373ea294643bc567c097e7c854d>
(<https://ulstercounty.maps.arcgis.com/apps/webappviewer/index.html?id=b6fa6373ea294643bc567c097e7c854d>)

☐ Tract 9514

☐ Tract 9517

☐ Tract 9518

☐ Tract 9520

☐ Tract 9535

☐ Tract 9544

☐ Tract 9553

☐ N/A

14. Target Population: Please select all that apply to indicate the groups most impacted by your organization:

- ☐ Children (age 0-12)
- ☐ Youth/Teens (age 13-18)
- ☐ Adults (age 19-64)
- ☐ Seniors (age 65+)
- ☐ Individuals with disabilities
- ☐ Low-income individuals/families
- ☐ Marginalized/under-served groups

15. Select all that apply: I certify that my organization operates under a board-approved

- ☐ Non-Discrimination Policy
- ☐ Conflict of Interest Policy

Organizational Changes Due to COVID-19

16. How has the COVID-19 Pandemic changed your organization's priorities and goals?

Maximum 700 words

17. How have your operations changed during the pandemic?

Maximum 700 words

18. Has the pandemic caused your organization to cancel major programs and/or fundraisers? Please indicate experienced and/or expected revenue loss from these instances.

Maximum 700 words

Funding Request & Financial Information

19. Total Funding Request:

20. Describe the work your organization has done in Ulster County since January 27, 2020, particularly in relation to COVID-19. Include Ulster County specific data as applicable.

Maximum 700 words

21. Explain how the Recovery funds will be expended. Eligible uses include loss of organization revenue; rent, mortgage, utility, or overhead costs; payroll and benefit costs.

See the application instructions for more details on each eligible use.

Maximum 700 words

22. Has your organization received any other federal relief funding, such as the Paycheck Protection Program, etc.? If so, please detail fund source, amount, and year received:

23. Does your organization receive revenue from any of the following revenue streams? If so, what percentage?

- a. Government grants and contracts
- b. Charitable grants and contributions (i.e. foundation grants and donations from individuals)
- c. Program service fees
- d. Investment income
- e. Other (Please explain)
- f. None

24. Has your organization been contacted by the Internal revenue Service (IRS) or the Attorney General's office within the last three years?

If so, please explain:

25. Has your organization received any funding from Ulster County within the last five years? If yes, list the funding source and amount.

26. Does your organization have any outstanding financial obligations to Ulster County? If yes, list all outstanding obligations to Ulster County.

27. Does your organization have any of the following? If yes, please explain how each has been utilized since March 3, 2021.

- a. Operating Reserve
- b. Endowment
- c. Line of Credit

Signature

28. Full Name:

29. Title:

30. Required Documentation: Please be sure to upload documents using the link below

<https://codev.ulstercountyny.gov/resilience-and-recovery/>
(<https://codev.ulstercountyny.gov/resilience-and-recovery/>).

- a. Organization Chart
- b. Timeline
- c. Recovery Workbook (**Template can be found in the above link**)
- d. Fiscal Agreement, if applicable
- e. IRS Form 990 from 2019, 2020, and 2021, if available

☐

I agree

☐

I do not agree (This will result in an automatic disqualification)

31. By entering your signature information and clicking "I agree" below you certify that:

(1) the statements and information provided in this application are true and correct to the best of your knowledge,

(2) you are authorized to submit this application on behalf of the applicant organization/agency, and

(3) you have read and will agree to the conditions outlined in the Non-Profit Recovery & Resilience Grant instructions.

☐

I agree

☐

I do not agree (This will result in an automatic disqualification)

